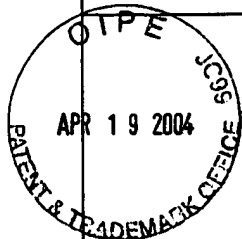


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# PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number (Optional)

15258US07



In re the Application of

**Ahmadreza Rofougaran**

Application Number

**09/699,040**

Filed

**October 27, 2000**

For

**Adaptive Radio Transceiver with Offset PLL with Subsampling Mixers**

Group Art Unit

**2682**

Examiner

**Marceau M. Ford****RECEIVED**

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

APR 22 2004

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

Technology Center 2600

- |   |           |
|---|-----------|
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$ 110.00 |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))           | \$        |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3))         | \$        |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))          | \$        |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))          | \$        |

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the amount shown above is reduced by one-half, and the resulting fee is: \$ \_\_\_\_\_.

☒ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 13-0017. I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor

☐ assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record. Registration Number 44,636

☐ attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a) \_\_\_\_\_

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

December 1, 2003

Date

(312) 775-8084

Telephone Number

Michael T. Cruz  
Signature

Michael T. Cruz

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 form is submitted.